

Missouri's Re-Entry Process

INTRODUCTION

One of the most pressing and complex challenges facing state government in Missouri and across the nation today is the reintegration of adult offenders from prison back into society. **Ninety-seven percent** of all the men and women committed to prison will someday be released from incarceration. During **FY2003 17,545 individuals were released** from Missouri correctional institutions, returning to live in communities across the state. It is in everyone's best interest that released offenders reenter society safely and live as law-abiding, self-sufficient citizens.

During FY03 18,042 individuals were committed to Missouri's prison system. Thirty-two percent of those prison commitments were returning parole violators who failed to transition successfully and were returned to confinement.

Missouri's Re-Entry Process (**MRP** is a **collaborative effort** among stakeholder agencies. Our **MRP goals** include:

- ◆ smarter transition practices
- ◆ increase public safety;
- ◆ strengthen families;
- ◆ stabilize neighborhoods;
- ◆ reduce new victimization;
- ◆ released offenders to become contributing citizens; and
- ◆ maximize resources.

Missouri is using an innovative transition model developed by the **National Institute of Corrections** as a philosophical framework for improving offender transition processes.

Corrections, law enforcement and human service agencies are all stakeholders in the re-entry process. Stakeholder interests are best served when they articulate and promote common interests, integrate and coordinate policies, and develop mutual ownership of improved transition processes.

PLANNING HISTORY

The DOC, the Judiciary, Human Services organizations, law enforcement and victims, together with all Missouri communities and citizens are vested stakeholders in offender transition. On August 21, 2002 an informational meeting to examine Missouri's offender transition practices was convened by Gary B. Kempker, with Directors from:

<ul style="list-style-type: none"> ◆ Department of Mental Health ◆ Department of Social Services ◆ Department of Health & Senior Services 	<ul style="list-style-type: none"> ◆ Office of State Courts Administrator ◆ Governor's Office ◆ Department of Economic Development
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At that time a consensus was achieved among the department directors to enter into an inter-departmental collaboration designed to improve transition practices. With assistance provided

through NIC, an inter-departmental workshop was conducted on September 10, 2002. Several Theme issues emerged from the workshop that were considered critical to successful transition practices. They included:

- ◆ Sharing information between stakeholder agencies
- ◆ Continuity of Care
- ◆ Coordinated case management
- ◆ Common assessment tools
- ◆ Common outcome measures
- ◆ Establish an inter-departmental planning process

Subsequently a MRP Steering Team was established to manage MRP planning efforts for the collaborating organizations and to develop strategies to improve transition practices.

The Steering Team began working on September 17, 2002. A process roadmap was established to guide the team's planning efforts. The team's initial efforts focused on establishing a solid foundation of information and knowledge from which to build new ideas from. A tremendous amount of baseline data was developed to determine what factors contribute to or undermine successful transition. Focus groups were conducted with successful offender groups, returned parole violator groups and Probation and Parole Officers. A review of the "what works" literature and research was also conducted. Based upon analysis of extensive quantitative and qualitative baseline data and information, those factors that are highly correlated with successful transition or recidivism in Missouri were identified. The identified "risk" and "protective" factors emerged as prime target areas for improving transition practices.

On April 16, 2003 Director Kempker convened a meeting with collaborating department directors to share the analysis and planning work completed by the steering team and to move forward with the establishment of ad-hoc teams that would develop specific recommendations to improve transition practices. The ad-hoc teams were designed to target the prime risk and protective factors.

With support from the collaborating departments, eight ad-hoc teams were chartered and met during May-June, 2003. The ad-hoc teams were comprised of subject matter experts from within and outside the stakeholder organizations. The ad-hoc teams developed 84 recommendations. Subsequently, the steering team carefully assessed each of the recommendations based upon impact and feasibility, ultimately narrowing the 84 recommendations down to 43 recommendations.

In September and October 2003, the recommended strategies were presented to the Parole Board, DOC Executive Staff and participating department directors. With limited modification, 35 strategies were approved for implementation. The strategies are divided into two parts – system attributes and offender attributes. Each of the strategies is designed to have positive impact on a specific element of transition. Collectively, the recommendations represent a substantial shift in organizational priorities, culture and practice. This purpose driven shift is designed to integrate and maximize resources, reduce recidivism and contribute to safer Missouri families and communities. The projected impact of the approved strategies is a 10% reduction in recidivism. During October 2003, the Steering Team identified implementation managers, developed "deliverables" and implementation "due dates." During December 2003 the Steering Team reviewed the implementation plan for each strategy in detail. The implementation plans for 34 strategies are moving forward with implementation. The implementation plan for strategy 2.5.01 "develop an infrastructure to share offender information electronically" has been deferred.

MRP STRATEGIES

STRATEGY TRACKING NUMBER	STRATEGY	IMPLEMENTATION MANAGER
1.1.12	Establish a Transition Accountability Plan (TAP)	Julie Rollins
2.0.01	Establish a presumptive release date as early as possible during incarceration and one that is consistent with the guideline release date in appropriate cases.	Jan Carter
2.0.02	Establish specialized housing units in each institution for offenders preparing for transition, including specially trained staff and full transition resources.	Mike Murphy
2.0.05	Establish an interdepartmental plan for internal and external communication and education about MRP	Tim Kniest
2.0.07	Develop an employability screening and rehabilitation plan process for each offender received into the department of corrections.	Jon Warren
2.0.08	Revise DMH institutional substance abuse treatment certification standards to place emphasis on discharge planning, transition practices, and successful linkage to community providers for continuity of care.	Rosie Anderson-Harper
2.0.09	Establish a means for offenders that complete institutional substance abuse treatment to obtain a referral for continuing outpatient treatment in the community, including an initial appointment, prior to release.	Denise Reynolds
2.0.10	Institutional mental health services providers do formal mental health discharge planning; allow them to make direct linkage to community providers for continuity of care.	Mariann Atwell
2.0.11	Identify and implement evidence-based programs for enhancing offender motivation	Scott Johnston
2.1.02	Prepare regular (e.g. monthly or quarterly) academic achievement reports for all offenders in Adult Basic Education/GED preparation classes	Jon Warren
2.1.03	Allow tutoring to count toward community service hours for probationers that are GED (or higher) graduates.	Ed Davis
2.1.10	Improve Keyboarding and computer skills as part of adult education and literacy services.	Leonard Rutledge
2.2.01	Establish linkage to the Division of Workforce Development and Workforce Investment Boards for services to offenders prior to release.	Jerry Tharp
2.2.02	Develop a targeted educational effort for prospective employers that demonstrates the benefits of hiring offenders following release from prison.	Jerry Tharp
2.2.03	Provide offenders with state ID card, birth certificate, and social security card upon release from prison.	Julie Rollins
2.2.05	Partner with one-stop career centers through formal linkages.	Jerry Tharp
2.2.08	Expand and provide Employability Skills/Life Skills programs to all offenders who would benefit from it prior to release from prison.	Jon Warren
2.2.09	Expand vocational training opportunities in institutions.	Jon Warren
2.3.01	Offer evidence-based relationship and family programming all institutions	Steve Cline

2.3.02	Offender visitor policy should include offender and family training on dynamics values, and importance of family and pro-social relationships.	Bill Burgess
2.3.08	Update friends & family orientation booklet & orientation visit at R&D.	Lisa Jones
2.3.15	Allow school ID's w/photo instead of requiring state ID's for visiting children.	Bo Morrow
2.3.18	Implement a therapeutic child and offender visitation program at all institutions.	Bill Burgess
2.3.20	Designate specialized DOSS staff to handle the needs of offenders prior to release from DOC institutions.	Bill Dent
2.3.38	Train institutional visiting room staff on public relations skills, stress management, anger management, and parenting.	Royce Hudson
2.4.11	Develop a wider range of housing options for offender released from institutions, including transitional housing for substance abusers.	Karia Basta
2.5.01	Develop an infrastructure to share offender information electronically so that it is in the hands of the people who need it for transition planning, continuity of treatment services, collaborative outcome measures and so on, but in compliance with HIPAA.	Dave Rost
2.6.04	Establish a means for disabled offenders to apply for Supplemental Security Income (SSI) prior to release.	Julie Rollins
2.6.05	Establish a means for eligible, disabled offenders to apply for Medicaid prior to release (also appropriate for physically disabled offenders).	Danny Moritz
2.6.07	Establish standards of care for mental health professionals working with released offenders.	Mark Stringer
2.6.11	Create a comprehensive, Web-based resource guide of services and resources available to transitioning offenders, their families, and Transition Accountability Team participants.	Jenny Wehmeir
2.7.01	Use a standardized substance abuse screening and assessment protocol for all offenders.	Marta Nolin
2.7.02	Require that all DOC-funded and operated institutional substance abuse treatment programs meet certification standards established by the Department of Mental Health in consultation with the Department of Corrections.	Marta Nolin
2.7.06	Offer individualized, community-based treatment programming that helps offenders succeed in both employment and substance abuse treatment without one interfering with the other.	Mark Stringer
2.8.05	Provide the written driver's license test inside correctional centers.	Tom Hodges

MRP STEERING TEAM

Members

Ansel Card	Department of Corrections, Board of Probation and Parole
Jan Carter	Department of Corrections, Board of Probation and Parole
Tom Clements	Department of Corrections, Division of Adult Institutions (Chairperson)
Bill Dent	Department of Social Services
Laurent Javois	Department of Mental Health
Scott Johnston	Department of Corrections, Probation and Parole
Gene Morgan	Kansas City Community Center
Marta Nolin	Department of Corrections, Division of Offender Rehabilitative Services
Julie Rollins	Department of Corrections, Women's Offender Program and Reentry Project Manager
Glenda Miller	Department of Health and Senior Services
Mark Stringer	Department of Mental Health, Division of Alcohol and Drug Abuse
Jerry Tharp	Department of Economic Development, Division of Workforce Development
Gary Waint	Department of State Courts Administrator, Juvenile and Adult Court Programs